

"COBRA"
GROUP CONTINUATION COVERAGE
RATES FOR JANUARY 1, 2003 TO DECEMBER 31, 2003

Rates are calculated at 102%. Not all carriers, however, will require 102%

-- BASIC --

PLAN CODE	PLAN NAME	1 Party	2 Party	3 Party
205	Blue Shield HMO	\$272.60	\$545.19	\$708.76
230	CA Assoc. Hwy. Patrolmen	\$313.45	\$621.86	\$813.98
56	Kaiser	\$264.39	\$528.79	\$687.43
**	Kaiser Out-of-State	\$362.78	\$725.57	\$943.23
278	PERSCARE	\$558.96	\$1,117.92	\$1,453.50
222	PERS Choice	\$301.92	\$603.84	\$785.40
207	PORAC	\$370.26	\$680.34	\$863.94
282	Western Health Advantage	\$213.08	\$426.16	\$554.00
274	CCPOA - North	\$264.18	\$607.61	\$739.69
284	CCPOA - South	\$238.48	\$548.51	\$667.74
286	CCPOA - SLO	\$301.87	\$694.30	\$845.23
256	CCPOA - Lassen	\$487.06	\$1,120.20	\$1,363.72

** These premiums cover all Regions of Kaiser Out-of-State.